## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(703) 746-4000 or <u>Fax</u>

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE	CE ADDRESS (Note: Use Block 1 for	any change of address)		Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying				
7590 12/03/2004			E vc		Fee(s) Transmittal. The papers. Each addition have its own certificate.	nis certificate cannot be used al paper, such as an assignme e of mailing or transmission.	for any other accompanying ent or formal drawing, must	
Jonathan P. Osha OSHA & MAY L. Suite 2800 1221 McKinney St	L.P.	MAR P	3 5002 8		Ce I hereby certify that t States Postal Service addressed to the Ma transmitted to the USI	rtificate of Mailing or Tran- his Fee(s) Transmittal is bein with sufficient postage for fi il Stop ISSUE FEE address PTO (103) 746-4000, on the	smission g deposited with the United st class mail in an envelope above, or being facsimile date indicated below.	
Houston, TX 7701		TRADENIA				(Depositor's name)		
•			TA IKAD				(Signature)	
<b>,</b> ,							(Date)	
APPLICATION NO.	FILING DATE	FIRST NAMED INVI			TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/813,584	03/30/2004		Arthur Edwar	d Lamn	nens , 03/0	9/2005 AWUNDAF2 00000	09 10813584	
TITLE OF INVENTION: S	TOPPER APPARATUS FO	R SLIDE RAIL			; 02 F	C:1501 C:1504 C:8001	1400.00 OP 300.00 OP 12.00 OP	
APPLN. TYPE	SMALL ENTITY	ISSUE FE	EE	PU	BLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1370			\$300	\$1670	03/03/2005	
EXAM	MINER	ART UNI	T	CL	CLASS-SUBCLASS			
HANSEN, JAMES ORVILLE		3637			312-334460			
"Fee Address" indica PTO/SB/47; Rev 03-02 Number is required.  3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN  (1) Sugat sur (2) Sugat sur		ation form e of a Customer  BE PRINTED ON T elow, no assignee of this form is NOT  (B. td.	or agents C (2) the nan registered; 2 registered; listed, no n  HE PATENT data will apper a substitute of the control of the c	DR, alternee of a sattorney d patent aame wilf (print cear on the for filling E: (CIT	single firm (having as or agent) and the nar attorneys or agents. It is be printed.  or type) the patent. If an assigg an assignment.  Y and STATE OR CO.  Tokyo, Japa Carson, Ca.	a member a 2		
4a. The following fee(s) are			. Payment of		- Individual - C	orporation of other private gr	oup entity - Government	
Issue Fee Publication Fee (No: XX Advance Order - # o	ed)	A check in the amount of the fee(s) is enclosed.						
	(from status indicated above		b. Applica	ant is no	longer claiming SMA	ALL ENTITY status. See 37 (	CFR 1.27(g)(2).	
The Director of the USPTO NOTE: The Issue Fee and F	is requested to apply the Iss	ue Fee and Publicat	from anyone	y) or to other th	re-apply any previous nan the applicant; a reg	ly paid issue fee to the applic gistered attorney or agent; or t	ation identified above. the assignee or other party in	
Authorized Signature Typed or printed name	Jonathan P.	45,079 Osha 71	tomas	SCH	Date	3/3/05 n No. 33,986		
an application. Confidential submitting the completed a this form and/or suggestion	lity is governed by 35 U.S.C pplication form to the USPT s for reducing this burden, s inia 22313-1450. DO NOT	. 122 and 37 CFR 1 O. Time will vary hould be sent to the	1.14. This coll depending up Chief Inform	lection in on the institution O	s estimated to take 12 ndividual case. Any officer, U.S. Patent and	the public which is to file (ar minutes to complete, includi comments on the amount of t d Trademark Office, U.S. Dep S. SEND TO: Commissioner	ng gathering, preparing, and ime you require to complete partment of Commerce. P.O.	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV535678848US, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria VA 223/3-1450, on the date shown below.

Dated: March 3, 2005

Signature: (Toni A. Hiff

Docket No.: 12088/017001

(PATENT)

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of: Arthur Edwards Lammens

Application No.: 10/813,584

Group Art Unit: 3637

Filed: March 30, 2004

Examiner: J. O. Hansen

For: STOPPER APPARATUS FOR SLIDE RAIL

## TRANSMITTAL LETTER

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Enclosed are the following items for filing in connection with the above-referenced Patent Application:

- 1. Fee Transmittal (1 page);
- 2. Part B Fees Transmittal PTOL-85 (1 page); and
- 3. Payment by credit card. Form PTO-2038 is attached (1 page). Charge \$1,712.00 to credit card;

Please charge our Credit Card in the amount of \$1,712.00 covering the required fees. Credit Card Payment Form SB-2038, with a signature from an authorized cardholder, is enclosed. The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 50-0591, under Order No. 12088/017001.

91920

Application No.: 10/813,584 Docket No.: 12088/017001

A duplicate copy of this paper is enclosed.

Dated: March 3, 2005

Respectfully submitted,

Jonathan P. Osha

Registration No.: 33,986 OSHA & MAY L.L.P.

1221 McKinney St., Suite 2800

Houston, Texas 77010

(713) 228-8600

2

PTO/SB/17 (12-04v2)
Approved for use through 7/31/2006. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduc	ion Act of 1995	, no personale	edoseo io i	sopona to a concotto				00111101110111					
Effective	- 1				nplete if Known								
Fees pursuant to the Consolidate	Application Nun		0/813,584-Conf. #4320										
FEE TRANSMITTAL				Filing Date		March 30, 2004							
For FY 2005				First Named Inv	0	Arthur Edwards Lammens							
10111 2003				Examiner Name	<del></del>	J. O. Hansen							
Applicant claims small entity status. See 37 CFR 1.27				Art Unit		3637							
TOTAL AMOUNT OF PAYI	MENT	No. 1	2088/017001										
METHOD OF PAYMENT (check all that apply)													
Check X Credit Card Money Order Other (please identify):													
x Deposit Account Deposit Account Number: 50-0591 Deposit Account Name: Osha & May L.L.P.													
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)													
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filling fee													
Charge any additional fee(s) or underpayment of Credit any overpayments													
FEE CALCULATION													
1. BASIC FILING, SEARCH	AND EXA	MINATION FE	ES										
I. BASIC I ILINO, SEARON		IG FEES		ARCH FEES	EXAMIN	ATION FEES							
	F (A)	Small Entity	Fac. (6)	Small Entity	Eoo (\$)	Small Entity	Eage I	Paid (\$)					
Application Type	Fee (\$) 300	<u>Fee (\$)</u> 150	Fee (\$)	<u>Fee (\$)</u> 250	<u>Fee (\$)</u> 200	<u>Fee (\$)</u> 100	<u>rees</u> i	aiu (v)					
Utility	200	100	100	50	130	65							
Design Plant	200	100	300	150	160	80							
Reissue	300	150	500	250	600	300							
Provisional	200	100	0	0	0	0							
2. EXCESS CLAIM FEES	200	100	v	v	v	·		Small Entity					
Fee Description							Fee (\$)	Fee (\$)					
Each claim over 20 (includi	ng Reissues	)					50	25					
Each independent claim over	er 3 (includi	ng Reissues)					200	100					
Multiple dependent claims					;		360	180					
Total Claims Extra	Claims	Fee (\$)	Fee F	aid (\$)	Mu	Itiple Dependent Claims							
20 =	× _	=			<u>Fe</u>	Fee Paid (\$)							
Indep. Claims Extra			_										
-3=	x												
3. APPLICATION SIZE FEE	:		_			•							
If the specification and dra listings under 37 CFR	wings exce	ed 100 sheets	of paper	(excluding electr	conically fil for small er	led sequence or	computer	0					
sheets or fraction there	of. See 35 l	application si J.S.C. 41(a)(1	)(G) and	37 CFR 1.16(s).	tor sinan ci	inty) for each c	idditional 2						
	xtra Sheets			dditional 50 or fra	ction thereo	f Fee (\$)	Fee	Paid (\$)					
- 100 =		/50		(round up to a who	ole number)	х	=						
4. OTHER FEE(S)							Fees	Paid (\$)					
Non-English Specificati							0.4	20.00					
Other (e.g., late filing su	ormal		00.00 100.00										
		12.00											
SUBMITTED BY													
Signature Signature		45,07	a	Registration No. (Attorney/Agent)	33,986	Telephone	(713) 22	28-8600					
Name (Print/Type) Abonathan	Date	March 3, 2005											
Name (Print/Type) 2 JUNIALITATI		THUI OIT	5, 2000										
I IL/						I							
v													
<u> </u>					<del></del>		NI	7004045					
I hereby certify that this corr	espondence ): Commission	is being depos	ited with the	ne U.S. Postal Ser x 1450, Alexandria	vice as Exp	ress Mail, Airbill 3-1450, on the d	No. EV5356	379848US, elow.					